

Please type a plus sign (+) inside box

Under the Paperwork Reduction Act of 1995, persons are required to respond to a collection of information unless it displays a valid OMB control number

11/16/01
10525 U.S. PTO09/992582
11/16/01UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney	7216-1
First Inventor	HITCHEN
Title	COLLABORATIVE FILE ACCESS MANAGEMENT SYSTEM
Express Mail	EL 649719902 US

APPLICATION ELEMENTS
See MPEP Chapter 600 concerning utility patent application contents.ADDRESS TO: Commissioner for Patents
Box Patent Application

- | | |
|---|--|
| 1 <input checked="" type="checkbox"/> Fee transmittal Form
(Submit an original and a duplicate for fee processing) | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix) |
| 2 <input checked="" type="checkbox"/> Specification
(preferred arrangement set forth below)

- Descriptive title of the invention
- Statement of the Technical Field
- Description of the Related Art
- Summary of the Invention
- Brief Description of the Drawings
- Detailed Description of the Preferred Embodiment
- Claim(s)
- Abstract of the Disclosure | 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence
(if applicable, all necessary)

a. <input type="checkbox"/> Computer readable Copy
<input type="checkbox"/> Paper Copy (identical to computer
Statement Verifying identity of |
| 3 <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 3] | 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents) |
| 4. Oath or Declaration [Total Pages 3] | 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney
(where there is an assignee) |
| a. <input type="checkbox"/> Newly executed (original or copy) | 10. <input type="checkbox"/> English Translation Document (if applicable) |
| b. <input type="checkbox"/> Copy from prior Application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)

[Note Box 5 below] | 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS
Citations |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed Statement attached deleting
inventor(s) named in prior application,
see 37 CFR 1.63(d)(2) and 1.33(b). | 12. <input type="checkbox"/> Preliminary Amendment |
| 5 <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application from
which a copy of the oath or declaration is supplied
under Box 4b, is considered as being part of the
disclosure of the accompanying application and is
hereby incorporated by reference herein. | 13. <input checked="" type="checkbox"/> 2 return receipt postcards (MPEP 503)
(Should be specifically itemized) |
| 14. <input type="checkbox"/> Applicant asserts Small Entity Status | |
| 15. <input type="checkbox"/> Certified copy of priority Document(s)
(if foreign priority is claimed) | |
| 16. <input type="checkbox"/> Other:
* A new statement is required to pay small entity fees, except where
one has been filed in a prior application and is being relied upon | |

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

 Continuation Divisional Continuation-in-part (CIP) of prior application no. /

Prior application information: Examiner: Group/Art Unit:

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<input type="checkbox"/> or <input checked="" type="checkbox"/> Correspondence address below
--	--

(Insert Customer No. or Attach bar code label)

NAME	Steven M. Greenberg				
ADDRESS	Akerman, Senterfitt & Eidson, P.A. Post Office Box 3188				
CITY	West Palm Beach	STATE	FL	ZIP CODE	33402-3188
COUNTRY	USA	TELEPHONE	561/653-5000	FAX	561/659-6313

Name	Steven M. Greenberg	Registration No.	44,725	
Signature			Date	11/16/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

FEE TRANSMITTAL

for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT \$864.00

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account 50-0951

Deposit Account Name Akerman, Senterfitt & Eidson, P.A.

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	370	Utility filing fee	\$740.00
106	206	165	Design filing fee	
107	207	255	Plant filing fee	
108	208	370	Reissue filing fee	
114	214	80	Provisional filing fee	
SUBTOTAL (1) (\$)				740.00

2. CLAIMS

	Extra	Fee from below	Fee Paid
Total Claims	20-20** = 0	X	=
Independent	4-3** = 0	X \$ 84.00	= \$84.00

Multiple Dependent Claims

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	9 Claims in excess of 20
102	84	202	42 Independent claims in excess of 3
104	280	204	140 Multiple dependent claim
109	84	209	42 Reissue independent claims over original patent
110	18	210	9 Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)			
84.00			

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	HITCHEN
Examiner Name	
Group Art Unit	
Attorney Docket Number	7216-1

FEE CALCULATION (continued)					
3. ADDITIONAL FEES					
Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid	
105	130	205	65 Surcharge - late filing fee or oath		
127	50	227	25 Surcharge - late provisional filing fee or cover sheet		
139	130	139	130 Non-English specification		
147	2,520	147	2,520 For filing a request for ex parte reexamination		
112	920	112	920 Requesting publication of SIR prior to Examiner action		
113	1,840	113	1,840 Requesting publication of SIR after Examiner action		
115	110	215	55 Extension for reply within first month		
116	400	216	200 Extension for reply within second month		
117	920	217	460 Extension for reply within third month		
118	1,440	218	720 Extension for reply within fourth month		
128	1,960	228	980 Extension for reply within fifth month		
119	320	219	160 Notice of Appeal		
120	320	220	160 Filing a brief in support of an appeal		
121	280	221	140 Request for oral hearing		
138	1,510	138	1,510 Petition to institute a public use proceeding		
140	110	240	55 Petition to revive unavoidably abandoned application		
141	1,280	241	640 Petition to revive unintentionally abandoned application		
142	1,280	242	640 Utility issue fee (or reissue)		
143	460	243	230 Design issue fee		
144	620	244	310 Plant issue fee		
122	130	122	130 Petitions to the Commissioner		
123	50	123	50 Petitions related to provisional applications		
126	180	126	180 Submission of Information Disclosure Stmt		
581	40	581	40 Recording each patent assignment per property (times number of properties)	\$40.00	
146	740	246	370 Filing a submission after final rejection (37 CFR 1.129(a))		
149	740	249	370 For each additional invention to be examined (37 CFR 1.129(b))		
179	740	279	370 Request for Continued Examination (RCE)		
169	900	169	900 Request for expedited examination of a design application		
Other fee (specify)					
Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$)	40.00

SUBMITTED BY			Complete (if applicable)		
Typed or Printed Name	Steven M. Greenberg	Registration No. Attorney/Agent	44,725	Telephone	561-653-5000
Signature				Date	11-16-01